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ABSTRACT

This final report describes the outcomes of four demonstration projects, funded in 1990 in Oregon, on early identification and prevention of mental and emotional disorders in children. The intention of the projects was to find ways to identify children who are at risk of suffering emotional disorders and intervene early enough to prevent these disorders. The first program described, the Interpersonal Cognitive Problem Solving Project, trained 1,400 children in social problem solving skills. In the second program, the Temperament Project, 188 parents received temperament services. The third project, the Jackson County Early Intervention Mental Health Project, provided special friends for 370 children who were at-risk. In the last project, the Family Service Project, close to 350 families were provided with parent education and support groups with concurrent and follow-up home visits. The report provides a description of each project, discusses progress since the interim report, evidence of the project's impact, and future plans. Results from the projects indicate positive changes in social behavior and child rearing practices. (CR)

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Final Report

STARTING RIGHT-PART II

Early Identification Demonstration Projects
January 1991 to July 1991

Prepared by
Nancy Koroloff, Ph.D.
February 1992

EC 307309

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STARTING RIGHT--PART II

A Final Report on Early Identification and Prevention Services for Children at Risk of Mental or Emotional Disorders Demonstration Projects

January 1991 to July 1991

Prepared for
Oregon Mental Health and
Developmental Disability Services Division

Prepared by
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EXECUTIVE SUMMARY

The 1990 Oregon Legislature supported funding for four demonstration project on early identification and prevention of mental and emotional disorders in children. Two of these demonstration projects were continued from the previous biennium and two began in January 1990. These four projects represent four models of early identification and prevention services that have been demonstrated in the state of Oregon. The intent of these project is to find ways to identify children who are at risk of suffering emotional disorders and intervene early enough to prevent these disorders. Two of the demonstration projects intervene directly with parents, teaching them parenting or social skills that will result in more positive home environments for children. Two of the demonstration projects intervene primarily with the children, usually in an elementary or preschool setting. One of these projects teaches children problem solving skills in order to strengthen their ability to deal with interpersonal problems. The other focuses on the bonding process and provides children with positive adult modeling followed by a group experience which increases their socialization skills.

The number of children and families served by these four programs has far surpassed the goals identified in each projects contract. Two of the demonstration projects worked with the public schools and had access to large numbers of children. The Interpersonal Cognitive Problem Solving Project, located at Morrison Center in Portland Oregon, screened and provided classroom instruction to 1400 children in the three and one-half years of its existence. Additional practice with the problem solving model was provided to approximately 280 of these children through a small group format. The Jackson County Early Intervention, located in Medford Oregon and started in January 1990, is another school based program. It screened 1500 children and provided one-on-one adult modeling to 370 children through the Special Friends Program. In addition, a subset of children identified as the most at-risk were involved in a small group socialization process. Both of the school based demonstration projects provided orientation session and materials for parents. The ICPS Project also developed and implemented a teacher training curriculum and replication manual. The Jackson County Project provided parent training classes for parents of children in the at-risk categories.

Two of the demonstration projects worked directly with the parents of children who are at-risk of mental or emotional disorders. The Temperament Project, located at the Center for Parenting Excellence in LaGrande Oregon, provided individualized screening, instruction and support to 188 parents in its three and one-half years of existence. During the first two years of the project, over 230 parents participated in the temperament screening process. In the latter years of the project, emphasis was placed on providing information to the public and allowing parents to self-select into the educational program. The Temperament Project has also been responsible for developing screening instruments, instructional materials and procedures for implementing the prevention ideals identified in temperament theory. The Family Service Project, located at Umatilla County Mental Health Services in Pendleton Oregon, provides instruction and support to parents through support group meetings and home visits. Forty-five groups, each meeting for about 10 sessions, were completed during the 16 months of the project. Close to 350 families, most from Head Start, WIC or alternative schools, participated in the Project. The Family Service Project has also developed special groups and curriculum for Spanish speaking families and Native American families.

Although the level of funding did not allow for extensive evaluation efforts, all four demonstration projects implemented program evaluation strategies. The two demonstration projects that have been functioning the longest, the ICPS Project and the Temperament Project, have been able to establish the effectiveness of their prevention approaches. The two newer demonstration projects have made significant advances in this direction. It is important to continue to support the evaluation of these two projects with adequate funding and technical support.

Three of the demonstration projects used a screening approach to select participants from a general population of children. There are some striking similarities in the findings that arise from screening children to determine who might be at risk of mental or emotional disorders. Both of the school based demonstration projects used the same screening tool (AML-R). The ICPS Project consistently found that between 20% and 25% of all children in the school district where the project was located were rated as at-risk. In one semester, 35% of the children were rated as at-risk. Using the same screening tool working in eight different school districts, the Jackson County Project identified between 20% to 30% of the children as being at-risk. In 1988, the Temperament Project tested a large number of families through the pre-school screenings held by the public schools. Using the ECBI, they found that 25% of the children had test scores that suggested the need for early intervention services. All three projects, working with different school districts in different parts of the state, found that between 20 and 25% of children were in need of early identification and prevention services. Some areas, particularly those with many families who are unemployed or living on low incomes, may find that closer to 35% of the children and their families are in need of supportive services to avoid mental health problems. This estimate of need is supported by research in other parts of the country. This level of need for preventive mental health support must receive serious attention in any discussion of long range mental health planning.

INTERPERSONAL COGNITIVE PROBLEM SOLVING PROJECT
MORRISON CENTER
PORTLAND, OREGON

Summary description of the project

The Interpersonal Cognitive Problem Solving Project (ICPS) is grounded in two related models; the ICPS model (Spivack & Shure, 1974) and the Rochester Social Problems Solving Program (Cowen, 1982). The ICPS model was developed to teach problem solving skills to children in preschool through first grade. The Rochester Social Problem Solving (SPS) Program, which is based in the ICPS model, was developed for children in second and third grade.

Both curricula provide children with steps to use in solving interpersonal problems. Each curriculum also provides the children and their teachers with a common language to use when communicating about problems. Children are involved in 18 lessons delivered in the classroom twice a week for 20 minutes per lesson. The content is delivered by a child specialist and the classroom teacher. After the children have acquired the skills of problem solving, efforts are made to help them generalize these skills through ongoing classroom strategies, and through involving parents in reinforcing the skills at home. At-risk children are identified by using the AML-R (Acting Out, Moody, Learning Disordered-Revised) screening tool and are given extra skill support through concurrent small group instruction.

During the 1988-89 project period, instruction was given to kindergarten and first grade students. During the 1989-90 school year training was provided to second and third graders and instruction was administered to first and second graders in 1990-91. Since the goal of the project is intervention as early as possible, it is the conclusion of the staff that these are the earliest grades that show benefit from the training.

Table 1. Number of children screened using the AML-R by each project year.

	Number screened	Number screened "at-risk"	Percent "at-risk"
1987-88*			
first grade	184	44	25%
1988-89			
kindergarten	138	26	19%
first grade	212	42	20%
1989-90			
second & third grade	407	84	21%
1990-91			
first grade	235	86	35%
second grade	223	51	23%

*Project started in January 1988

Table 1 presents the number of children screened and instructed by this project since its inception in January of 1988.

In addition to in-class instruction, the ICPS project has provided small group support to those children identified as "at-risk". The purpose of this activity is to optimize the impact of classroom training and the opportunity for generalization of the problem solving skills for these children. In 1989-90, small groups were offered to at-risk children in both second and third grade classes. In 1990-91, weekly small group instruction to first grade at-risk children was continued through out the school year. Small groups were not available to second grade students during this year, even though they received in-class instruction. The value of offering small group instruction for the entire year to at-risk first grade children seemed to outweigh the value of offering shorter term small groups to both grades.

During the final year of this project, attention was focused on modifying the model for replication, developing and implementing a teacher training program, writing the replication manual and continuing to provide services within the schools.

Progress since interim report

The Interim Report on the Early Intervention Demonstration Projects (Koroloff, 1991) provides a description of project activities through December 1990. From January through June 1991, the project continued to provide classroom instruction to second grade children using the SPS curriculum. Two hundred twenty three second grade children were instructed, including 51 (23%) who were identified as at-risk. Small group instruction continued with first grade at-risk children through the end of the school year.

In April, the ICPS project collaborated with Parents as Partners (a related project funded by the Meyer Memorial Trust) in offering a series of SuperSolving Family Nights to families of children receiving the instruction. A variety of activities are offered at these gatherings including opportunities for children to demonstrate their problem solving skills via role play. A parent manual is given to all parents. They are given a chance to discuss issues around problem solving at home. These evenings are designed to optimize parental involvement with the goals of familiarizing parents with the model and encouraging support of their children.

During the 1990-91 project year, the course "Social Problem Solving in the Classroom" was developed and required of all classroom teachers whose students received SPS instruction. Since the Interim Report, training of the second grade teachers has been been completed. The course consists of four sessions, each session is approximately one hour long. The first two sessions take place before SPS instruction begins in the teacher's classroom. The third session is scheduled for four to six weeks into the SPS curriculum and the fourth session occurs after the SPS instruction has been completed.

During sessions one and two, the teachers receive information about the problem solving model and methods of teaching problem solving skills. They also participate in experiences that allow them to explore their own problem solving styles. Three major problem solving styles are discussed as well as the impact of each style on the child's learning of problem solving skills. During the third session, teachers come back together with the child specialist. They examine their experiences in the first few weeks of teaching the SPS curriculum with specific emphasis on what is working. This session helps teachers develop a support system with each other. The fourth session focuses on planning for

future uses of the SPS curriculum as well as examining ways of promoting generalization of the problem solving skills in future classroom activities.

The project has completed work on the development of a manual for disseminating information about the ICPS (SuperSolvers) Program and Parents as Partners Projects. This manual will be useful to agencies or school districts wishing to replicate the ICPS or Parents as Partners Project. A grant from the Challenge Foundation was received for the printing and dissemination of 100 manuals.

Project staff worked extensively with the Centennial School District to include this project in the districts 1991-92 budget. Although there was substantial support from district and building staff, no new programs were added to the districts budget due to the passage of Ballot Measure 5. The district has been seeking foundation grants to continue the project.

Evidence of program impact

Measurement of program impact was completed during the 1989-90 year. The results of this evaluation are found in the Interim Report (Koroloff, 1991).

Future plans

This project was closed on June 30, 1991, project staff were terminated and the project office dismantled. In fall 1991 resources became available from MHDDSD to hire a part-time person to provide technical assistance and consultation on replication of the model and use of the manual. This assistance is provided to programs interested in adopting the ICPS model in Multnomah County and statewide.

UNION COUNTY TEMPERAMENT PROJECT
CENTER FOR PARENTING EXCELLENCE
LAGRANDE, OREGON

Summary description of the project

The Temperament Project is based on the theory that children are different from one another from the time they are born. While the most obvious differences are in physical appearance, the theory holds that each child is born with a unique style of behavior called temperament. The Temperament Project is based on findings from a longitudinal study done by Chess and Thomas (1984) which identified several temperament patterns exhibited by children. These include the "easy" child (35%), the "slow-to-warm-up" child (15%), and the "difficult" child (10%). The "difficult" child often causes stress for parents and is most likely to develop significant behavior problems by age 10.

The primary emphasis of the Temperament Project has been to provide temperament-related parenting consultation to parents of children 18 months through 6 years. Over the course of the project, this age range has expanded to the point that project staff now serve parents of children through age 18. The staff of the Project consists of a Program Coordinator and several Temperament Specialists. Temperament Specialists are parents who are specially trained in the temperament model of parenting. They do not generally have an advanced degree or professional training. Temperament Specialists meet individually with parents on a weekly basis for approximately 6 to 8 sessions. The number of sessions vary depending on the needs of the parents. Parents are recruited into the Temperament Project through preschool screenings, self-referrals and agency referrals.

Progress since Interim Report

Between January and June 1991 the Temperament Project implemented some dramatic changes in order to be in a position to continue to exist if funding ended for the 1991-93 biennium. The major changes included (a) a fee/scholarship system which greatly reduced the frequency of missed appointments and generated consistent revenue for each hour of service provided and (b) computer software which automated many procedures making the project more cost efficient.

Fee/Scholarship Program. Currently, parents are charged $40 per session. Scholarships are available for parents who cannot afford to pay the total amount. The frequency of missed appointments has been an issue for this project. Staff instituted a new policy in January 1991 which allowed parents a certain number of missed appointments after which they pay $20 for each uncanceled and missed appointment. Since then parents have been averaging less than one missed appointment per eight week period.

Integrated into this new system is the scholarship program. This scholarship fund permits the project to meet the needs of low income families whenever money is available. In general, funds have been available to meet the requests from low-income parents for the project. With the continuation funding that has been appropriated for this biennium, this situation should continue. However, the project will start denying services to people who can not afford the full fee when the scholarship funds run out. The dwindling scholarship fund, combined with public demand for services, will be used as a basis for fundraising efforts. Parents are asked to set their own fees based on what they can

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afford and with the goal of helping to stretch the scholarship fund. Under these procedures, parents seem to set their fees higher than they would pay on a sliding fee scale.

Computer Software Development. New software programs have been developed which automate many tasks with the purpose of increasing efficiency. Software that has been created for the Temperament Project now includes the following programs.

Participant Tracking Software. This software simplifies many day-to-day tasks including record keeping, tracking participants, program evaluation, maintaining mailing lists, sending standard letters, printing program status reports, etc.

Accounting Software. This software provides a simple system for keeping track of revenues and expenses, billing clients and third party payees, and managing the scholarship fund. It also produces useful reports detailing the program's financial status.

Management Strategy Software. Management strategies have become the core of the advice offered to parents. Currently about 30 strategies are in written form, but many more have been created over the project's life. Staff needed a way to quickly get strategies into written form and to select strategies based on each parent's needs. A child's temperament is entered and titles of all relevant strategies are displayed on the screen. Staff can then print either the entire list or just the strategies desired.

ECBI-88 Scoring Software. This software scores the child behavior questionnaire and stores results in up to five databases.

Parenting Resource Finder Software. This software maintains a list of informational resources (books, articles, tapes, etc.) along with brief descriptions of each resource. A three level, mouse driven menu system makes it possible to quickly locate resources on a broad range of highly specific topics.

Marcel Zentner, a clinical psychology student from Switzerland, completed a 200 hour practicum with the Temperament Project. His time was divided about equally between clinical experience and research/program development.

Project Participants. Table 2 summarizes what has happened with clients who have enrolled in the Temperament Project since its inception. Clients enrolled in each quarter are broken down into three categories: completed, did not complete, and still open. Clients in the "still open" category will eventually end up in either the " completed" or the "did not complete" category.

To date, 74% of the parents who enrolled in the project have completed it. The most common reason parents give for not completing is that they are too busy to keep up with the requirements of the program. This effect has been minimized by (1) negotiating solutions earlier in the process with parents who have busy lives and (2) fine tuning the services more carefully with these busy parents so that the workload can be kept at a minimum.

Table 2. Participants in the Temperament Project.

Quarter Ending		Enrolled	Completed	Did Not Complete	Still Open
September	1988	2	2	0	0
December	1988	9	9	0	0
March	1989	36	26	10	0
June	1989	11	9	2	0
September	1989	11	7	4	0
December	1989	11	9	2	0
March	1990	28	21	7	0
June	1990	23	18	5	0
September	1990	16	7	7	2
December	1990	13	5	7	1
March	1991	21	18	3	0
June	1991	7	2	1	4
TOTALS		188	133	48	7

The second most common reason why parents do not complete the program is a referral for professional services. Some of these parents, again the busy ones, need to drop out of the Temperament Project so they can devote enough energy to these other services.

During the two quarters ending September (1990) and December (1990), there was a noticeable increase in the percentage of parents not completing the program. This was probably related to the move to a fee-based service. Once this transition was accomplished, the percentage of completion rose to 86 percent.

The demographic profile of the 188 parents served is found in Table 3.

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Table 3. Demographic characteristics of participants.
(n=188)

INCOME (173 Respondents*)	
0 - 9,999	48 (28%)
10,000 - 19,999	33 (19%)
20,000 - 29,999	44 (25%)
30,000 - 39,999	31 (18%)
OVER 40,000	17 (10%)
MOTHER'S EDUCATION (177 Respondents)	
Did not graduate high school	18 (10%)
Graduated high school	34 (19%)
Completed some college	60 (34%)
Graduated technical school	14 (8%)
Graduated college	37 (21%)
Earned a graduate or professional degree	14 (8%)
FATHER'S EDUCATION (142 Respondents)	
Did not graduate high school	15 (11%)
Graduated high school	36 (25%)
Completed some college	42 (30%)
Graduated technical school	11 (8%)
Graduated college	21 (15%)
Earned a graduate or professional degree	17 (12%)
FAMILY COMPOSITION	
Single Parent (160 Respondents)	39 (24%)
Blended Family (156 Respondents)	39 (25%)

*Demographic data is missing for some participants

Evidence of Project Impact

The Temperament Project collected two kinds of evaluation data, both based on parent report. First, data on participants' opinions about the services have been collected via a follow-up questionnaire. Second, reassessment of the child, using the modified Eyberg Child Behavior Inventory (ECBI-88), provides a measurement of the change in the child's behavior.

Participant Satisfaction. During the period from December 6, 1990 through September 1, 1991, follow-up questionnaires were mailed to all parents who had completed the Temperament Project since it first began providing services in 1988. One questionnaire was sent for each child. Thus, parents who focused on more than one child received more than one questionnaire. In total, 114 parents were sent 125 questionnaires. About 3 weeks after questionnaires were sent, reminder letters were mailed to parents who had not returned their questionnaires. Finally, about two weeks after reminder letters were sent, another letter was mailed to all 114 parents. This letter thanked parents who had

Table 4. Participant satisfaction with services.
(n=80)

Question	1988-89 (n=32)	1989-90 (n=35)	1990-91 (n=13)	1988-91 (n=80)
How much were you helped by the Temperament Program?				
1.None	0 (0%)	0 (0%)	0 (0%)	0 (0%)
2.A little	0 (0%)	1 (3%)	0 (0%)	1 (1%)
3.Some	8 (25%)	5 (14%)	3 (23%)	16 (20%)
4.Much	15 (47%)	16 (46%)	4 (31%)	35 (44%)
5.Very much	9 (28%)	13 (37%)	6 (46%)	28 (35%)
Mean	4.03	4.17	4.23	4.13
How much did your child's behavior improve as a result of what you learned in the Temperament Program?				
1.None	0 (0%)	0 (0%)	0 (0%)	0 (0%)
2.A little	3 (9%)	2 (6%)	2 (15%)	7 (9%)
3.Some	17 (53%)	13 (37%)	3 (23%)	33 (41%)
4.Much	8 (25%)	16 (46%)	6 (46%)	30 (38%)
5.Very much	4 (13%)	4 (11%)	2 (15%)	10 (13%)
Mean	3.41	3.63	3.61	3.54
How helpful were your weekly meetings with your Temperament Specialist?				
1.Not helpful	0 (0%)	0 (0%)	0 (0%)	0 (0%)
2.Somewhat helpful	4 (13%)	2 (6%)	0 (0%)	6 (8%)
3.Helpful	11 (34%)	17 (49%)	6 (46%)	34 (43%)
4.Very helpful	17 (53%)	16 (46%)	7 (54%)	40 (50%)
Mean	3.41	3.40	3.54	3.43
How helpful was the written information you received?				
1.Not helpful	0 (0%)	0 (0%)	0 (0%)	0 (0%)
2.Somewhat helpful	6 (19%)	4 (11%)	1 (8%)	11 (14%)
3.Helpful	10 (31%)	15 (43%)	4 (31%)	29 (36%)
4.Very helpful	16 (50%)	16 (46%)	8 (62%)	40 (50%)
Mean	3.31	3.34	3.54	3.36
How often are you now using what you learned in the Temperament Program?				
1.Never	0 (0%)	0 (0%)	0 (0%)	0 (0%)
2.Sometimes	12 (38%)	12 (34%)	3 (23%)	27 (34%)
3.Often	14 (44%)	19 (54%)	10 (77%)	43 (54%)
4.Very often	6 (19%)	4 (11%)	0 (0%)	10 (13%)
Mean	2.81	2.77	2.77	2.79

returned their questionnaires and encouraged parents who had not returned their questionnaires to do so in the next few days.

In total, 80 questionnaires (64 percent) were returned by the date this report was written (09/13/91). Seven parents had moved without leaving forwarding addresses, so 68 percent of the questionnaires received by parents were completed and returned.

Table 4 provides a summary of the responses from the parent satisfaction portion of the questionnaires. The questions in Table 4 were designed to investigate various aspects of parent satisfaction. The above findings suggest that most parents were satisfied with the services. The project was particularly interested in comparing the responses of parents entering the program during each fiscal year to determine whether parents might slip back into old habits and, as a result, rate these satisfaction items lower than parents who had completed the program more recently. It was also believed that parents entering the project more recently had received an increasingly comprehensive service. Thus, the ratings for each successive year would be higher than the previous years.

No significant differences were found between mean ratings on any of the five questions. Parents who entered the project during each year were about equally satisfied with the service. These findings suggest that even the earlier, less sophisticated versions of the Temperament Project were meeting the needs of parents.

Parents were also asked to provide written responses to several open ended questions about various aspects of the Project. Parents were asked to list the most important things they had learned from the Temperament Project. The most common responses were in the following areas: parents report (1) becoming more confident in their parenting abilities, (2) developing a number of parenting techniques that work for their children, (3) becoming more understanding and accepting of their children, (4) becoming more optimistic about their children's futures, and (5) generalizing the information they received to influence the way they think about and respond to other children.

Of particular interest is the fact that only three parents (4 percent) listed punishment techniques as one of the three most important things they learned in the program. Additionally, reward techniques were listed by only 8 percent of the parents. Punishment and reward techniques are discussed with almost every parent who completes the program. Also, almost every parent receives a substantial amount of written information about reward and punishment techniques. Still, few parents indicate that this information was of particular help.

This finding corresponds directly to some of the changes currently being made in the project. Staff concluded that most parents are already familiar with, and skilled at, punishment and reward types of parenting strategies. The issues parents are most often concerned about when they enter the program tend to be issues that don't respond well to these types of strategies. Thus, the material is being rewritten so that staff will have an option about whether information on rewards and punishment strategies will be presented.

Child Behavior Outcomes. This project uses the modified Eyberg Child Behavior Inventory (ECBI-88) to assess the changes in child behavior. The ECBI-88 is a paper and pencil test with 88 items which is completed by the parents. Results using an earlier version of this test were detailed in a report issued at the end of the first biennium (Koroloff, 1990) and suggested positive indications of the project's effectiveness in

reducing problem behaviors in children. The present study was conducted using data obtained during the project's second biennium. During this period, 130 parents enrolled in the program and 87 parents completed it. All 87 parents who completed the program have been asked at least once to complete a follow-up ECBI. To date, 52 follow-up ECBI's have been received. This represents approximately 60 percent of the parents who completed the program during this time period.

Over the past four years the project has developed an expanded version of the ECBI in order to better assess and evaluate change in temperament related behaviors. The new instrument is called the ECBI-88. It includes the original 36 items of the ECBI followed by 52 items developed by the project. Parents completing the program during the project's second biennium have received various versions of this new instrument. Pre- and post- intervention comparisons on the new items of the ECBI-88 were not possible for the present study. Comparisons were made on the original 36 items.

In the follow-up study conducted at the end of the project's first biennium, parents were mailed post-intervention ECBI's one to nine months after completing the program. Because return rates were low, the project shifted to another method during its second biennium. Parents were asked to complete the post-intervention ECBI-88 prior to their final appointment. This led to an increased return rate, but it reduced the amount of time available for behavior changes to take place. The project eventually shifted back to a method similar to that used during the first biennium. Due to the changing methodology for conducting post-intervention assessments, parents in the present study completed follow-up ECBI-88's from zero to 14 months after completing the program.

During its first biennium, the project served a narrowly defined population of parents. These parents entered the program seeking more effective ways of responding to their young children who were primarily exhibiting problem behaviors in their conduct. During the project's second biennium, services expanded to include assistance with a broader range of temperament and non-temperament related behaviors. The development of the ECBI-88 has, in part, been an attempt to support this expansion. Because the present study is limited to the original 36 items of the ECBI, these other types of difficult behavior cannot be addressed.

Each item on the ECBI is rated by parents in terms of the intensity of the behavior and the extent to which it poses a problem for the parent. This yields two different scores: The Intensity Score and the Problem Score. Through empirical tests, cutting scores have been established: 127 for the Intensity Score and 11 for the Problem Score. Scores at or above these cutting scores are considered outside the norm.

Table 5 summarizes the findings for ECBI Intensity and Problem Scores. Also included are two additional scales: Defiance (Intensity and Problem) and Attention Span (Intensity and Problem). These are two subscales from the current version of the ECBI-88 which happen to be contained within the first 36 items. Cutting scores for the Defiance Scale are 16 (Intensity) and 2 (Problem). Cutting scores on the Attention Span Scale are 17 (Intensity) and 2 (Problem).

Table 5. Mean ECBI Scores: Pre- and Post-Intervention.

Scale	n	Pre	Post	t
ECBI Intensity	52	145.2	120.1	6.68***
ECBI Problem	52	17.4	8.5	8.11***
Defiance Intensity	52	18.4	14.1	6.63***
Defiance Problem	52	2.7	1.3	6.78***
Attention Span Intensity	52	17.1	15.8	2.10*
Attention Span Problem	52	1.6	.7	3.66**

*p < .05. **p < .01. ***p < .001

Pre-intervention test results on the ECBI averaged substantially above the cutting scores on both the Intensity and Problem dimensions. At follow-up, the mean ECBI Scores on both dimensions had declined significantly and were below critical levels. The Defiance Scale correlates very highly with the overall ECBI Scales. Thus, it is not surprising that the results on the Defiance Scale were very similar to those found on the full ECBI.

The Attention Span Scale is thought to be an indicator of a temperament trait known as Distractibility. Because this behavior is thought to be more biologically determined, it is predictable that decreases on the Attention Span dimension would not be as dramatic as on the other dimensions. Scores on this dimension were at or below the cutting scores at the pre test. They did decline significantly by the post test.

It is important to remember that these scores are based on parent ratings. Parents who are very pleased with the services they received from the Temperament Project may be inclined to rate their children's behavior more positively. Even with this potential bias in mind, the changes reported here are positive and suggest that the intervention has a modifying impact on children's behaviors. Parents are often most distressed by the defiant behaviors of their children. As these behaviors are brought under control, parents can attend to the more gratifying aspects of parenting.

Future Plans

In fall, 1991, the Temperament Project received funding from MHDDSD for the next biennium. In addition to providing services to parents, the project will produce a staff training manual and develop additional program materials for use with parents.

As services have been expanded to new populations, there has not been enough time to write the materials that are needed to fully support these expansions. The process of developing new materials will be a focal point of the project over the next two years. Staff are currently interviewing parents who have been through the program to determine the needs for new materials.

In the past, the Temperament Project has not been advertised since available slots were being filled without doing so. Because of increases in efficiency, the present staff can now provide services to 140 parents annually. Information about the project will be disseminated broadly in order to better inform the community about its availability.

Presently, the scholarship program is funded by the MED Early Intervention grant. Over the 1991-93 biennium, the project will put in place a formal fundraising process that will reduce or eliminate the need for state or other grant funding for the purposes of providing services through the Temperament Project.

The Temperament Project is complex enough that program development will probably never be completed. As indicated in previous reports, a non-profit corporation has been set up that will (1) take responsibility for disseminating the program to other communities and (2) continue program development efforts. Parenting Excellence Inc (PEI) has been organizing for these purposes for more than a year and has just recently received its tax-exempt 501(c)(3) designation from the IRS. Over the next biennium, program development activities will be transferred to PEI. The Union County Temperament Project will continue to benefit from program development efforts.

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JACKSON COUNTY EARLY INTERVENTION MENTAL HEALTH PROJECT
JACKSON COUNTY HEALTH AND HUMAN SERVICES
MEDFORD, OREGON

Summary description of the project

The Jackson County Early Intervention Project was developed around the core bonding process described in the Social Development model (Hall, 1986). The project utilizes three separate services: 1) the Special Friends Project, 2) parent training and 3) socialization groups. All three services are provided at elementary and at-risk preschool sites. The project utilizes the existing network of service providers with Jackson County Health and Human Services coordinating the various aspects of the project.

Children are screened at the beginning of the school year using the AML-R (Acting out, Moody, Learning Disordered-Revised). Children who score as either at-risk or high-risk are initially enrolled in the Special Friends Project. In this project, children work with a specially trained child aides on a one-to-one basis for 12 sessions. These sessions take place in a specially designed play setting within the child's school. While their children are involved with the Special Friends Project, parents are invited to parent training sessions held at the school. The parent training involves seven sessions focused on child development, effective communication, discipline, and nurturing parent-child relationships. Parents are also invited to one individual session at the end of their child's involvement with Special Friends.

Those children who are identified as isolated or rejected by their peers can be enrolled in a socialization group after they finish their involvement with Special Friends. This component consists of ten half-hour group sessions with six to eight children. The group leader presents a progressive series of group games and activities while allowing children to practice social skills.

This project was designed to work with high-risk kindergarten through second graders at elementary schools and preschools. During the first year the project had sites in three elementary schools and one Head Start center. During the second year four additional sites were added, three elementary schools and a second Head Start center. The Special Friends component was implemented in a ninth site, the OnTrack Child Care Program (associated with a drug treatment program), but barriers such as scheduling and length of stay of the child led to discontinuance.

California has adopted the Special Friends (Primary Intervention Project) program as a state mental health prevention program for at-risk children (children who score from the tenth to twentieth percentile on the AML-R). They chose to work with this group because they found at-risk children gained more than the high-risk children (those who score from zero to the tenth percentile). In addition, California has alternative programs for the high-risk children. The sites participating in the Jackson County Project do not have alternative programs so the project was designed to work with both high-risk and at-risk children. However, the Jackson County Project targeted three initial elementary sites in which to do a local comparison study. The first half of the year, these three sites worked only with at-risk children; the second half only with high-risk children. Mean test scores changes did not show any major differences between the success rates of the two groups. Child aides noted that it was slightly more difficult to work with the at-risk group because the children were less needy and somewhat more demanding in terms of

need for environmental stimulation and entertainment. All three aides stated that they preferred working with the high-risk group because they had a clearer sense of their impact and felt more bonded with the children. Teachers had some concerns about the project working with the at-risk children rather than the high-risk children at the beginning of the year. The decision has been made to stop differentiating between the two groups and allow sites to choose children for the project from those scoring in the zero to twenty percentile range.

Table 6 indicates the number of children screened and served by the Early Intervention Mental Health Project over the project period. Estimates by the project staff suggest that between 20 to 30% of the children in each school fell into the at-risk or high-risk categories based on the AML-R screening. Only a portion of these children could be served because of limited staff resources.

Table 6. Number of children screened and served.

	Number of children screened	Number served	Percent served
Fall, 1989	707	80	11%
Fall, 1990	830	146	18%
Spring, 1991		143	17%

Progress since interim report

The Interim Report on the Early Intervention Demonstration Projects (Koroloff, 1991) provides a description of project activities through December 1990. Since that date, the program was successfully completed in all sites. All children enrolled in the eligible grades were screened for the project in the fall of 1990. Children entering after September were also screened if the teacher felt they might be eligible for the program. One hundred and forty six children were selected from the children screened for intervention during the fall semester, 1990. In January 1991, an additional 151 children were selected for participation in the spring semester. Of this group, 143 completed the program. Table 7 presents the demographic characteristics of these children.

Table 7. Demographic characteristics of children participating in spring semester, 1991. (n=143)

Characteristic	Number	Percent
Sex of child		
Male	78	54%
Female	65	45%
Grade level		
Preschool	13	9%
Kindergarten	14	10%
First grade	67	47%
Second grade	49	34%
Income of child's family		
Low-income*	82	57%
Not low-income	61	43%
Race of child		
Caucasian	125	87%
Hispanic	14	10%
Native American	3	2%
African American	1	1%

*USDA or Headstart eligible

During the spring 1991, socialization groups were run at six elementary school sites and involved 60 children. Members of the second cohort of children to be served in socialization groups were selected by school staff from the children who had completed the Special Friends program. Two criteria were used to select children for socialization groups, 1) children were selected who had difficulty relating with peers and 2) children were selected in such a way that the resulting group was balanced and teachable. Five of the socialization groups were conducted using the standard curriculum developed by Janet Tam, project coordinator. These groups were jointly led by a therapist hired by the project and by the Child Development Specialist at the site. The sixth group, done at a small rural school, used an educational model and was led by the child development specialist and the child aide. This change was necessary partially due to a lack of resources and partially due to lack of training in therapy on the part of available staff. The Child Development Specialists and the school's professional staff were very pleased with the groups; they saw change in the children enrolled and also saw the group as a valuable training experience and support to the staff. Child Development Specialists stated that they could use the skills and activities with other groups of children at their site.

In-service training for the child aides who conduct the Special Friends sessions was provided throughout the project. During the second half of the 1990-91 year, individual child aides trained the group in their special area of expertise. The aides met biweekly for training, support and program information.

During the last two quarters of the project, five parent training classes were held. All classes were taught by staff from Family Focus/Crisis Intervention Center, a local agency

that developed the parent training curriculum. All classes were held either at one of the schools or in a location close to the school. Classes met for seven session. Both parents and children attended; the children's sessions include curriculum which paralleled that of the parents. The parent's classes were interactive and experiential.

A minimum of 16 parents were enrolled in each of the five parent training classes. A total of sixty eight parents participated in the groups. Participants were either parents of children enrolled in the project or parents with high-risk characteristics referred by Child Development Specialists. The completion rate was 71%, considered very high for multisession voluntary programs for parents in the high-risk category. Parent evaluations were done at the end of each individual session and were generally very positive. In addition, parent orientation sessions were held at 4 schools for parents of children in the Special Friends program with 25 parents attending.

There were no major personnel or program changes at any of the eight sites during the last part of the project period. School staff were pleased with the program. It took considerable time and energy to start the project and get it integrated into each site but once this happened, staff were supportive and helpful. Parents attending parent orientation or parent training sessions were pleased that their child had a special friend, although they had many questions about how their child had been selected for the project. Several parents spoke positively about the project at PTO meetings and to school staff. Two parents testified at the legislative session.

Evidence of project impact

Results from the evaluation of the first semester (spring 1990) of the program are located in the Interim Report (Koroloff, 1991). The following are data on children who participated during fall semester 1990 and spring semester 1991.

One hundred and forty-six children were enrolled in Special Friends in fall, 1990. One hundred and thirty-four children completed the program by attending a minimum of 10 sessions (90% completed 12 sessions). The Teacher-Child Rating scale (TCRS) is a behavior assessment tool completed by the classroom teacher. Pre- and post-testing was completed on 125 children. The results of these assessment are presented in Table 8.

Table 8. TCRS Scores of Participants in Special Friends Project, Fall 1990. (n=125)

Scale	Pre-test Mean	Post-test Mean	Percentile Difference
Acting-Out	29.52	33.95	4.43
Shy-Anxious	28.22	38.34	10.12
Learning Skills	29.63	36.46	6.83
Frustration Limit	29.76	37.43	7.67
Social Skills	35.43	45.76	10.33
Task-Oriented	35.03	42.80	7.77
Peer Social	35.82	42.99	7.17

As Table 8 indicates, all of the post-test mean scores were higher than the pre-test mean scores suggesting that most children were moving in a positive direction on the TCRS.

Overall pre- to post-test differences ranged from 4 to 10 percentile points. When the individual site scores are viewed, 53 of 56 subscale scores show positive differences between pre- and post-test means. Three sites showed negative change in one subscale score each; two on the subscale Peer Social and one on the subscale Acting-Out.

One hundred and forty-three children were enrolled in Special Friends in the spring of 1991. One hundred and ten completed at least the minimum number of ten sessions and teachers completed the pre- and post-test TCRS on 105 children. Table 9 reports these scores.

Table 9. TCRS Scores of Participants in Special Friends Project, Spring 1991. (n=105)

Scale	Pre-test Mean	Post-test Mean	Percentile Difference	t Score
Acting-Out	33.56	41.32	7.76	4.45
Shy-Anxious	32.43	39.27	6.84	3.22
Learning Skills	31.21	41.39	10.18	4.85
Frustration Limit	30.21	38.28	8.07	5.31
Social Skills	35.43	43.83	10.40	5.77
Task-Oriented	36.36	44.10	7.74	5.82
Peer Social	34.16	40.72	6.56	3.87

The difference between pre- and post-test mean were positive on all seven subscales suggesting movement on the part of the children. The differences were larger for this group (ranging from 6 to 10 percentile points) than for the children who participated in spring 1990 or fall 1990. The children in this group (spring 1991) had higher pre-test mean scores than those tested during fall 1990. The pre-test scores in spring 1991 were similar to those in spring 1990 suggesting a scoring pattern perhaps related to the school year and the teacher's familiarity with the children. In general, large positive changes were seen on the subscale Social Skills in both fall 1990 and spring 1991 groups.

The Child Development Specialists (CDS) in each site were asked to provide evaluative feedback about the project. Overall, the Child Development Specialists felt that the project was "very successful" and had positive impact on the children involved. As one CDS noted: "You could see the changes in some of the children. If you screened the children next year, some of them would no longer have enough of a problem to be eligible." Teacher observations were that children highly valued the project and their special friend and that many of the children in the project made major changes in classroom behavior. They described the children as more confident and better able to relate to others.

The Child Development Specialists also rated the socialization groups as "very satisfactory". They thought that the groups were successful in helping the children involved and in giving the CDS's training in running this type of group. Children in some groups tended to have more difficult relationship problems and these groups, although more difficult to run, were rated as most successful.

Future plans In fall 1991, continued funding was awarded to this project by MHDDSD. The project is being continued at all eight of the sites that were involved during the

1990-91 project year. Ashland School District is funding all of its program except the socialization group. Eagle Point School District, which housed three project sites, is funding one-third of the costs of the project. The two Head Start sites are being funded through EPSDT services and the services are being adapted to fit EPSDT requirements.

Because of funding limitations, only one series of socialization group meetings is being done at each site. Several of the Child Development Specialists, however, are conducting a second series on their own. Parents are invited to a parent orientation meeting during which the program is explained, staff introduced and questions answered. Parents are referred to parent training classes but the project is not sponsoring any classes of its own.

Sites will be given the option of receiving half of the funds necessary to maintain the project in fiscal year 1992-93. Sites must provide the rest of the needed funds. At this time, five of the sites are likely to continue under this offer, however, funds are available for all eight sites if all choose to participate.

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FAMILY SERVICE PROJECT
UMATILLA COUNTY MENTAL HEALTH SERVICES
PENDLETON, OREGON

Summary description of the project

The Family Service Project offers early intervention services for children at risk of mental or emotional disturbances through a collaborative effort between Umatilla County Mental Health Program (UCMHP) and Umatilla-Morrow County Head Start (Head Start). In both Pendleton and Hermiston the two agencies are located adjacent to one another and have well established working relationships. The Family Service Project was developed to provide parent and social skill training combined with social network development to parents of high risk children. The focus of the project is on increasing the parent's ability to resolve social, emotional or behavioral difficulties with their children. The project also helps parents develop skills that will allow them to seek community help at the earliest appropriate time. The Family Service Project is based on a social interaction model developed into an early intervention program by Childhaven, a therapeutic day nursery in Seattle, Washington. The Childhaven curriculum, which was developed for use in a parenting education program for parents who neglected or abused their children, covered topics such as child development, values clarification, social skills, anger and stress management. This curriculum has been modified to better meet the unique needs of parents in eastern Oregon. Also, Positive Indian Parenting, a curriculum developed for Native American parents by the Northwest Indian Child Welfare Institute, is followed with the group that meets on the Umatilla Indian Reservation.

Originally, the Project was developed to serve parents participating in either the Head Start or WIC programs, although the referral base has broadened to include teen-age parents and parents referred from CSD and other agencies. The Family Service Project offers parenting groups with concurrent and follow-up home visits to reinforce the skill training received in the groups. Development of the parents' social support network is a structured part of the group activities. The project builds upon existing Head Start program elements, such as home visits, parent involvement in the classroom, boards and councils, to further refine the parent's support network. The project employs two Family Service Advocates. The Family Service Advocates are part time and usually come to the program with some college education and prior experience in early childhood education or public school teaching. One Advocate is assigned to work in the eastern portion of Umatilla County and the other covers the western portion of Umatilla County and portions of Morrow County.

The Family Services Advocates conduct the parent support groups which meet weekly for 10 weeks and involve 10-12 participants in each group. Following the Childhaven curriculum, the two to three hour group meetings are divided into the following parts: the first half hour is devoted to positive reporting on how the week has gone; the second half hour is spent discussing child management issues and developing appropriate ways to resolve difficulties; the last one or two hours are spent in developing the curricular concept of the week and practicing the skills. Homework activities are given each week and are reviewed at the beginning of each session. Head Start provides transportation, child care, and refreshments. Some of these supports are augmented by a Great Start grant. Both day and evening groups are offered.

An important component of the project is the generalization of each skill to the parent's

environment. Regularly scheduled home visits are conducted by both Head Start and Family Services Project staff, usually twice a month. These visits focus on identifying areas of skill deficits, discussing realistic change expectations and rehearsing skills. Project and Head Start staff help parents design and carry out family activities based upon these individualized goals.

Progress since Interim Report

The Interim Report on the Early Intervention Demonstration Projects (Koroloff, 1991), provides a description of project activities through December 1990. From January through June 1991, the Family Services Advocates have become involved in providing parenting information and support to a wider variety of families. Active groups now include one for Spanish speaking parents, one for Native American parents and support continues for teen-age parents. In addition, the ongoing support groups continue with more referrals of teens and young parents going back to school as a result of the Family Support Act (Welfare Reform).

Support groups have been provided at the Alternative High Schools in both Hermiston and Pendleton. The Hermiston group is co-facilitated by high school staff and the Pendleton group by a mental health staff member. Due to the shorter time available (one hour) the focus has been on skill training, particularly those parenting skills requested by the students. These topics included a visit to a local Birthing Center and discussion with a physician. In the spring, the focus of the Pendleton Alternative Education class was on drug and alcohol issues that related to parenting including discussion of Fetal Alcohol Syndrome and the fetal alcohol effect.

After several collaborative meetings with other county and local agencies, counselors at Pendleton High School requested that project staff facilitate a teen parent support group on site. The group met for 75 minutes weekly after school hours. The parents in the group would like to continue even though seven were graduating seniors. During the summer, the Pendleton High School group and the Pendleton Alternative Education group were combined into a single Teen Support Group.

A group for parents who speak Spanish has been developed in Umatilla. A Head Start staff member who speaks Spanish co-facilitates this group. Staff is considering the use of an alternate curriculum, *Strengthening Families*, which is culturally specific and targeted for Hispanic families. The parents who attend the Spanish speaking group have strong family ties but are otherwise socially isolated. At first the participants in this group were shy and did not ask questions or talk openly. Slowly the group has evolved to the point that they share the difficulties that arise from not speaking English. The group has become a place where members can ask the interpreter (co-facilitator) to read a letter from unemployment or call a dentist to make an appointment. The group celebrates events which are important to the members, such as when one member passed her driving test. One parent shared that she had asked a friend to give her a ride and afterwards discovered that the friend had no driver's license and could not speak or read English. Another group member then offered to drive this parent to places she needed to go. An ongoing problem is lack of interpreter time. It is difficult to arrange home visits with only one Spanish speaking staff person to meet the needs of both the Head Start and Family Service Project.

When the parent support group on the Umatilla Indian Reservation finally became a reality, a decision was made to adopt a more culturally appropriate curriculum. Follow-

ing much research and meeting with Tribal Elders, the curriculum, *Positive Indian Parenting* by Terry Cross, ACSW, Director of the Northwest Indian Child Welfare Institute, was adopted. This curriculum includes units such as Traditional Parenting, Lessons in Storytelling, Lessons of the Cradleboard, Choices in Indian Parenting, Lessons of Mother Nature and Harmony in Child Rearing. The Family Service Advocate has attended a three day training with Terry Cross on the implementation of the curriculum. With the help of the Tribal Elders, a Native American father was found to co-facilitate this group. Also at their suggestion, the parent support group was renamed the Parent Circle since the circle has a positive reinforcement value within the tribal community.

The following tables provide information about the number of parents who participated in the support groups and their demographic characteristics.

Table 10. Family Service Project activities.
(1/91 to 6/91)

Activity	1/91-3/91	4/91-6/91
Letters sent	880	534
Phone contacts	177	166
Home visits	173	146
Number of different groups	12	13
Groups sessions held	84	78
Number attending groups*	470	475

*duplicated count, individuals attend several group sessions and are counted at each session.

Most support groups had an average attendance of 5 or 6 parents although sometimes as many as 10 or 12 parents participate. Some groups, those at the alternative high schools in particular, were larger and averaged as many as 12 participants a session. Both the Spanish speaking and the Native American support groups were small, averaging around 3 parents each session.

Table 11. Demographic information on participants.
(1/91 to 6/91)

Variable	1/91-3/91* (n=86)	4/91-6/91 (n=122)
Sex of parent		
Female	69	95
Male	17	27
Age of parent		
15-20	37	26
21-25	17	38
26-30	20	20
31+	12	22
unknown		16
Marital status		
Married	27	60**
Single	63	62
Age of children		
0-3	198	103
4-5	37	36
6-12	45	49
Race of parent		
Caucasian	65	82
Hispanic	12	31
Native American	8	7
African American	2	2

* In addition, the Project also served seven parents who were pregnant, two parents who were disabled, and five parents who did not speak English.
** Includes "living as married".

Several ongoing support groups continue with good attendance. The Family Service Project has many parents who have completed the curriculum, but continue to attend on an as needed basis. These parents say that the positive way of looking at parenting and the feeling of high self-esteem that results from the support groups is so encouraging that they feel the need to attend periodically. This does not present a problem since the curriculum is general enough that it is possible to introduce new resources related to old topics thus making each group session unique. Three demonstration support group sessions were held for the Basic Skills class at Blue Mountain Community College. Several participants from these groups joined existing support groups.

Some of the support groups include parents dealing with major challenges, such as parents with children who are emotional disabled, parents in abusive relationships, and parents who are themselves developmentally delayed. In one group, after a child was molested, the group was able to give support but also confront the parent on her responsibility to provide her child with safety. Participants in another group gave a presentation on preparing a child to attend pre-school. This was done to assist a parent with

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chronic mental illness who was reluctant to send her child to the local early intervention classroom. After this same mother was seen driving with a three year old child on her lap, the group gave a program on car safety. This mother has responded well to the information and reports back to the group on her progress and that of her child.

The social support network development has continued to grow. The group participants in both the east and west ends of the counties developed and organized an end of the year "Bar-B-Que ". They did this completely without aid from the Family Service Advocates or any other organization. They solicited the donations of childrens' drinks from McDonalds restaurant, organized a menu and delegated responsibilities. Parents brought food that took time and energy to prepare, a major undertaking given the limited resources of these families. They also borrowed sports equipment and organized games for the children.

Evidence of the effectiveness of the group process had been shown in other ways. Parents exchange information, baby sitting, phone calls and transportation. They look forward to the group meetings and bring issues to talk about such as behavior problems of children, problems with agencies, triumphs, job leads, etc. In April, two members of a Pendleton group and two members of a Hermiston group drove to Salem with the Family Service Advocates to testify before the State Senate Sub-Committee for Human Resources. The testimony of these parents provided a vital contribution to subsequent partial funding of the early intervention projects.

The original plan for making home visits have been modified after it became clear that twice a month visits would place an unreasonable work load on the Family Service Advocates. The current approach is to conduct an initial home visit in order to answer any questions the family may have about the group. Subsequent home visits are made on an as needed basis. Home visits may also become the responsibility of the referring agency and might be conducted by their staff.

Project staff are developing a replication manual with the intention of providing instructions for any agency wishing to form and conduct parent support groups. The manual will contain the following sections: Introduction, Getting Started, Personnel, Screening and Referrals, Project Services, Funding and Project Evaluation. Included also are the staff's observations and comments as well as a discussion of things they would do differently. It is their hope that the manual will provide a step by step process for others to follow in developing a similar project. This manual will become available in spring, 1991.

The coordination and collaboration between the Umatilla County Mental Health Program and Head Start has been refined with the Family Advocates working more closely with Head Start staff. They collaborate on staffings of families involved in support groups to indicate progress made in the group and skills that need additional practice. Head Start has become more and more active in recruiting families for the groups. Both staffs meet once or twice a month to discuss issues or concerns that create barriers to the effective functioning of both programs. The two programs have committed themselves to the continuation of the Family Service Project and worked together to obtain continued funding.

The staff changes during this time period occurred in June when the Project Coordinator resigned to take the position of Assistant Director of the Umatilla/Morrow County Head Start. Her presence in this position will continue to benefit the Family Service Project

because her unique knowledge of the project and her expertise will contribute to the ongoing collaborative efforts between UCMH and Head Start. At that time Laurie Redeagle Belgarde was hired as the Project Coordinator. Ms. Belgarde brings to the project a great deal of clinical experience with families.

Evidence of program impact

The instrument selected to measure program impact on parental skills training is the Adult-Adolescent Parenting Inventory (Bavolek, 1984). The AAPI is designed to assess the parenting and childrearing attitudes of adolescents and adults. Data generated from the instrument indicates degrees of agreement or disagreement with maladaptive parent behaviors. Participants complete the AAPI pre-test during the second parent support group meeting. The instrument was scored and results were reviewed with the participants at the next group meeting. The results were used by participants for self-assessment and goal setting. The participants were intended to completed a different form of the AAPI at the last group meeting although this activity did not always fit with the group process and resulted in missing data.

Results of AAPI pre- and post-test scores for 22 participants are presented in Table 12. Both the raw score and the standard score are presented. The standard score converts the raw score to a ten-point scale. About 80% of the general population scores at or above 4.5 on this ten-point scale. The AAPI provides subscores on four parenting constructs: 1) inappropriate parental expectations, 2) parental lack of empathic awareness of child's need, 3) parental lack of physical punishment, and 4) parent-child role reversal. Additional description of these subscales can be found in the Interim Report (Koroloff, 1991).

Table 12. Comparison of AAPI Pre- and Post-Test Scores.
(n= 22)

Parenting Construct	Raw Score		Standard Score	
	pre	post	pre	post
Expectations	23.6	24.8	5.9	6.4
Empathy	31.8	32.8	5.7	5.9
Punishment	36.2	37.2	5.8	6.3
Family Roles	31.1	31.9	6.7	6.3

No significant differences was found between the pre- and post- test scores of individual parents using a paired t-test. As Table 12 reports, however, mean scores were higher at post-test than at pre-test suggesting the potential for positive effect. The one exception to this finding is in family roles where the standard score was slightly lower at post-test.

Questions still remain about whether the AAPI is the most appropriate instrument for measuring outcome in this program. Although the scale seems to provide useful assessment information to both project staff and participants, socially appropriate answers are easily apparent and may be given by parents early in the program before a trusting relationship is built. Project staff continue to consider other ways of measuring the impact of the program.

Future plans

In fall of 1991, two years of continued funding was awarded to this project by MHDDSD. The project will continue to provide services at the current level. The manual will be completed and disseminated during 1992.

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